

**APPLICATION DATA SHEET****Application Information**

Application number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD disks::

Number of copies of CDs::

Sequence submission?::

Computer Readable Form (CRF)?:: No

Number of copies of CRF::

Title :: SILK STENT GRAFTS

Attorney Docket Number:: 110129.433

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 7

Small Entity?:: No

Petition included?:: No

Petition Type::

Licensed U.S. Gov't Agency::

Contract or Grant No::

Secrecy Order in Parent Appl.?:: No

**First Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Canada
Status::	Full Capacity
Given Name::	David
Middle Name::	M
Family Name::	Gravett
Name Suffix::	
City of Residence::	Vancouver
State or Province of Residence::	BC
Country of Residence::	Canada
Street of mailing address::	616 West 21st Avenue
City of mailing address::	Vancouver
State or Province of mailing address::	BC
Country of mailing address::	Canada
Postal or Zip Code of mailing address::	V5Z 1Y8

**Second Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	France
Status::	Full Capacity
Given Name::	Pierre
Middle Name::	E
Family Name::	Signore
Name Suffix::	
City of Residence::	Vancouver
State or Province of Residence::	BC
Country of Residence::	Canada
Street of mailing address::	#207 – 2155 West 7th Avenue
City of mailing address::	Vancouver
State or Province of mailing address::	BC
Country of mailing address::	Canada
Postal or Zip Code of mailing address::	V6K 1X9

**Third Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Canada
Status::	Full Capacity
Given Name::	Kaiyue
Middle Name::	
Family Name::	Wang
Name Suffix::	
City of Residence::	Vancouver
State or Province of Residence::	BC
Country of Residence::	Canada
Street of mailing address::	103 – 1005 East Broadway
City of mailing address::	Vancouver
State or Province of mailing address::	BC
Country of mailing address::	Canada
Postal or Zip Code of mailing address::	V5T 1Y5

**Fourth Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Philip
Middle Name::	M
Family Name::	Toleikis
Name Suffix::	
City of Residence::	Vancouver
State or Province of Residence::	BC
Country of Residence::	Canada
Street of mailing address::	8011 Laburnum Street
City of mailing address::	Vancouver
State or Province of mailing address::	BC
Country of mailing address::	Canada
Postal or Zip Code of mailing address::	V6P 5N8

**Fifth Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Canada
Status::	Full Capacity
Given Name::	Dechi
Middle Name::	
Family Name::	Guan
Name Suffix::	
City of Residence::	Vancouver
State or Province of Residence::	BC
Country of Residence::	Canada
Street of mailing address::	8363 Shaughnessy Street
City of mailing address::	Vancouver
State or Province of mailing address::	BC
Country of mailing address::	Canada
Postal or Zip Code of mailing address::	V6P 3Y1

**Sixth Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	People's Republic of China
Status::	Full Capacity
Given Name::	Zengxuan
Middle Name::	
Family Name::	Hu
Name Suffix::	
City of Residence::	Vancouver
State or Province of Residence::	BC
Country of Residence::	Canada
Street of mailing address::	411 - 1209 East Broadway
City of mailing address::	Vancouver
State or Province of mailing address::	BC
Country of mailing address::	Canada
Postal or Zip Code of mailing address::	V5T 1Y8

**Seventh Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Canada  
Status:: Full Capacity  
Given Name:: Arpita  
Middle Name::  
Family Name:: Maiti  
Name Suffix::  
City of Residence:: Vancouver  
State or Province of Residence:: BC  
Country of Residence:: Canada  
Street of mailing address:: 211 – 2920 Ash Street  
City of mailing address:: Vancouver  
State or Province of mailing address:: BC  
Country of mailing address:: Canada  
Postal or Zip Code of mailing address:: V5Z 4A6

**Correspondence Information**

Correspondence Customer Number :: **00500**

**Representative Information**

Representative Customer Number::		<b>00500</b>
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**Domestic Priority Information**

Application ::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	An application claiming the benefit under 35 USC 119(e)	60/437,463	12/30/02

**Foreign Priority Information**

Country::	Application number::	Filing Date::	Priority Claimed::

**Assignee Information**

Assignee name::	
Street of mailing address::	
City of mailing address::	
State or Province of mailing address::	
Country of mailing address::	
Postal or Zip Code of mailing address::	